

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	<i>[Signature]</i>	<i>9/14/00</i>
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	<i>16</i>	<i>9/23/00</i>
FORMALITY REVIEW	<i>[Signature]</i>	<i>6573</i>	<i>5/23/00</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
- (Through numeral)	Canceled	A	Appeal
+	Restricted	O	Objected

BEST AVAILABLE COPY

Claim	Final	Original	Date
1	✓	✓	9/10
2	✓	✓	9/12
3	✓	✓	9/12
4	✓	✓	9/12
5	✓	✓	9/12
6	✓	✓	9/12
7	✓	✓	9/12
8	✓	✓	9/12
9	✓	✓	9/12
10	✓	✓	9/12
11	✓	✓	9/12
12	✓	✓	9/12
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14	✓	✓	9/12
15	✓	✓	9/12
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25	✓	✓	9/12
26	✓	✓	9/12
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28	✓	✓	9/12
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42	✓	✓	9/12
43	✓	✓	9/12
44	✓	✓	9/12
45	✓	✓	9/12
46	✓	✓	9/12
47	✓	✓	9/12
48	✓	✓	9/12
49	✓	✓	9/12
50	✓	✓	9/12

Claim	Final	Original	Date
51	✓	✓	9/10
52	✓	✓	9/10
53	✓	✓	9/10
54	✓	✓	9/10
55	✓	✓	9/10
56	✓	✓	9/10
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96	✓	✓	9/10
97	✓	✓	9/10
98	✓	✓	9/10
99	✓	✓	9/10
100	✓	✓	9/10

Claim	Final	Original	Date
101	✓	✓	9/10
102	✓	✓	9/10
103	✓	✓	9/10
104	✓	✓	9/10
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106	✓	✓	9/10
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124	✓	✓	9/10
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144	✓	✓	9/10
145	✓	✓	9/10
146	✓	✓	9/10
147	✓	✓	9/10
148	✓	✓	9/10
149	✓	✓	9/10
150	✓	✓	9/10

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)